

REMARKS

Applicants hereby amend the claims to eliminate the Claim 27 informality and accept the allowance indicated in the Office Action.

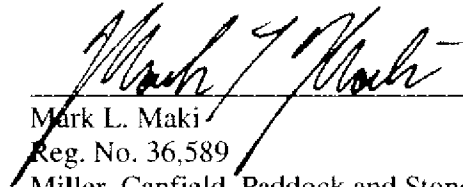
CONCLUSION

For the foregoing reasons, Applicants respectfully request that the Examiner reconsider and withdraw the claim rejections, and allow claims 1-33.

Applicants have a total of six independent claims. The fee for each additional claim over 3 is \$220.00. The Director is authorized to withdrawal the requisite fee of \$660.00 from Deposit Account Number 503654, referencing file number 147828/00005.

Respectfully submitted,

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